LEAVE OF ABSENCE FACT SHEET





Important Information Regarding Your Benefits while on an approved Leave of Absence

While on an approved leave of absence, you will continue to be responsible for your normal employee share of all premium costs. Your benefit premiums will be paid through payroll deductions and you will be eligible for all your benefits as long as the employee share of premiums are paid.

Should you exhaust your leave balances and go into an **unpaid status**, you will still be responsible for your normal employee share of premium costs with payment collected through Placer County Revenue Services. When you are in an unpaid status **and** you are not covered under FMLA/CFRA/PDL, you may become responsible for both the **employee** and employer share of the premium costs.

If you fail to return to work from an approved medical or baby bonding leave of absence, you may be responsible to reimburse the County for ALL premiums paid both, employee and employer premiums, for the entire duration of the leave of absence, which may result in the retroactive billing of premiums.

- To reduce your liability, you have the option to discontinue your Health, Dental, Vision, Life and/or Accidental Death benefits during your leave. Should you want to make changes to your current coverage or have any questions, contact the Human Resources Department.
- If you discontinue your benefits under Placer County, you must submit a CALPERS HBD-12 form, as well as a **Health Insurance Opt-Out** form to Human Resources.
- Management or District Attorney/Child Support Attorney Leave earned on a pro-rated basis, may be adjusted, resulting in a reduction or employee reimbursement of hours to the County.

BEFORE-TAX DEDUCTIONS AFTER-TAX DEDUCTIONS EMPLOYER PAID BENEFITS Description Current YTD Description Current YTD Description Current **YTD** Total Share Paycheck Sample GREAT Life Ins Supplemental Medical Plan Medical Plan of Premium Delta Dental of California Life Spouse Supplemental Delta Dental of California Costs = Vision Service Plan Vision Service Plan AD&D Dependent **Employee Employer** GREAT Life Insurance **Employee +** AD&D Employee Supplemento AD&D Employee St Share of Share of **Employer** AD&D Spouse CalPERS Employee 401(k) Premium Costs **Premium Costs** 个 TOTAL: TOTAL: TOTAL: